PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents F.O. Buz 1450 Alexandria, Virginia 22313-1450

				or <u>Fax</u>	(57	1)-273-2885				
MSTRUCTIONS: This spropriete, All furthe ndicated unless correct naintenance fee notific	is form should be used a correspondence included fed below as directed cations.	for transming the Pai therwise in	itting the ISS icnt, advance Block 1, by	UE FEE and PUBLIC orders and notification (a) specifying a new c	of m	ON FEE (if requirements fors pundence address	sired), i will be s; and/o	Blocks I through 5 a mailed to the current (b) indicating a sep	hould be correspon arate "FEE	completed where idense address as ADDRESS" for
	DENCE ADDRESS (Not: Use									
		Note: A certificate of meding can only be used for domestic meetings of the Fec(s) Transmitted. This certificate cannot be used for any other accompanying papers. Each additional peops, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.								
2292										
PO BOX 747	VART KOLASCI CH, VA 22646-074		CH, LLP		I her State addre trans	Cer by centify that if is Postal Service t issed to the Mai mitted to the USP	rtificats his Feet with sul I Stop TO (\$7	of Mailing or Trans s) Transmittal is being Beiont postage for fir 185UE FEE address 1) 273-2885, on the d	miasion deposited deposited deposited deposited above, er ate indicate	I with the Umted il in an envelope being fassimile ed being
										(Depositor's excus)
										(Signorus)
						***************************************				(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENT			DR ATTORNEY DOCKET NO.			CONFIRMATION NO.	
19/7 22, 459 ITLE OP INVENTION	11/28/2993 N: Washing Machin	E		Jong Seok Kim				0465-1098P	***************************************	8286
APPLN, TYPE	SMALL ENTITY	ISSUE	FEE DUE	PUBLICATION FEE D	ue T	PREV. PAID ISSU	E FFE	TOTAL FEE(S) DUE	7 0	ATE DUE
nonprevisional	NO	·	1440	\$300		50		\$1740		1/1 1/2008
EXAMINEE		I AR	TLOST	CLASS-SUBCLASS		7			- 2	
RIGGLEMAN	4	1746	068-023100							
Change of correspond	lence address or indication	n of *Fee/	Address* (37	2. For printing on the	se no	test front nage 16	ef .			***************************************
Change of correspondence address or indication of "Fee Address" (37 FR. 1,583). Ill Change of correspondence address (of Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent atterneys Birch, Stewart, or agents OR, alternatively,						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/4); Rev U3-02 of more recent) stacked. Use of a Customer Number is required.				(2) the name of a single limm (having as a member a requirement almoracy or agond) said the names of up to 2 registered pasent attentions or agents. If no manne is listed, no name will be printed in the name of						
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI- LG E19C1	IND RESIDENCE DAT less an assigned is iden the 17 CFR 3.11. Com GNES LYONICS INC tiste assigned estepary o	iffici belov plotion of ti	, ne assignee his form is NO	data will appear on the T a substitute for filing (B) RESIDENCE: (C Secul,	e psi en ai TY i	ent. If an assign ssignment. and STATE OR C	of 1	ky) Korea		
The following fee(s) Si Issue Fee Si Publication Fee (* Advance Order	Payment of Fec(s): (Please first reapply say previously poid issue for thom above) A check is enclosed. Payment by retail earl. Form PTO-2038 is situached. The Director is hereby substantiated as cherge for proging fige(s), say deficiency, or oregin asy overpayment, to Depoid Account Number 0 2 - 2, 4, 8 Deciclete on exist copy of flid (smm).									
a. Applicant claim	tus (from status indicate s SMALL ENTITY stat	as. See 37 (D b. Applicant is no	longe	er olaiming SMAI	L ENT	TTY status, See 17 CF	R 1.37(g)(1).
DIE: The Issue Fee an erest as shown by the	c Publication Fee (if res records of the United St	sired) will dee Patent s	not be accepte and Trademark	d from anyone other the Office.	n the	applicant, a regi	stered a	Korney or agent, or th	assignee	or other party is
Authorized Signature	1 19	Hi.	<i>I</i> 2					ry 10, 200		
Typed or printed name	(r ur.		Registration No. 39,538							
is eatlection of inform application. Confiden- mitting the completed a form and/or suggesti	ation is required by 37 (tislify is governed by 35 d application form to the loss for reducing this bu	FR 1311. U.S.C. 12: USPTO 1 dest, should	The information and 37 CFR fime will vary d be sent to the	ns is required to obtain 1.14. This collection is depending upon the in the Chief Information Of	or ret estim divid ficer,	ain a benefit by the nated to take 12 m bust case. Any co. U.S. Patent and	ne publi ninutes mments Tradem	t which is to file (and to complete, including on the amount of tin uk Office, U.S. Depa	by the US gathering e you requ timent of C	PTO to process) preparing, and ire to complete commerce, P.G.

Pris collection of information is re an application. Confidentiality is a substitute the completed applications form and/or suggestions for re Box 1450. Alexandris, Virginia 22 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, so persons are required to respond to a collection of information unless it displays a valid OME control number.